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Editorial

This issue of EJOGR touches upon an old obstetrical story: the history of ergot alkaloids (van Dongen and de Groot, 1995, see page —).

The use of ergot as an oxytocic drug originates from the classic work of Chassar Moir in the thirties and the amine alkaloid has since found its application in the prevention or treatment of postpartum haemorrhage as well as bleeding problems like menorrhagia.

The study of De Groot et al. shows that at least oral methylergometrine maleate has a late and unpredictable effect on the activity of the human uterus during menstruation. In addition, pharmacokinetic analyses performed on the same women at the time of recording showed large individual differences in absorption and in the time and values of maximum plasma concentration.

In the same study, the hypothesis is launched that the process of menstruation is comparable to the process of

placental separation and expulsion. This is a fascinating thought and probably true for intra-uterine pressure patterns, spiral arteries, the plane of separation, i.e. the basal and functional layers of endometrium and decidua, respectively, and the intra-uterine blood coagulation cascade including fibrinolysis and intravascular plug formation.

This comparison is certainly not true for the differences in uterine size and the striking differences in hormonal milieu during menstruation and the immediate postpartum period. Nevertheless, it seems worthwhile to originate further study on the similarities or dissimilarities of two periods in reproductive age that so far do not have the high priority that these deserve: prevention of haemorrhage.

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